



Modified 02-03

PTO/SB/21 (01-03)  
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|--|-------------------------|----------------------|
| <b>TRANSMITTAL<br/>FORM</b><br><i>(to be used for all correspondence after initial filing)</i> | Application / Conf. No. | 09/724,974 / 7823    |
|  | Filing Date             | November 28, 2000    |
|  | First Named Inventor    | Steven M. Trimberger |
|  | Examiner Name           | Minh Dieu T. Nguyen  |
|  | Art Unit                | 2137                 |
|  | Patent No.              |                      |
| Mail Stop:   | Attorney Docket Number  | X-805-3 US           |
| Express Mail<br>Receipt No.  |                         |                      |
| Total Number of Pages in This Submission   |                         |                      |

| ENCLOSURES (check all that apply)  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                           | <input type="checkbox"/> Assignment Papers<br>(with Recordation Cover Sheet)                  | <input type="checkbox"/> After Allowance Communication to   |
| <input checked="" type="checkbox"/> Amendment / Reply                              | <input type="checkbox"/> Declaration / Oath   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences   |
| <input type="checkbox"/> Preliminary Amendment                                     | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief)   |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Licensing-related Papers   | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Affidavit(s)/declaration(s)                               | <input type="checkbox"/> Petition -   | <input checked="" type="checkbox"/> Return Receipt Postcard   |
| <input type="checkbox"/> Extension of Time Request                                 | <input type="checkbox"/> To Convert a<br>Provisional Application                              | <input checked="" type="checkbox"/> Other Enclosure(s)<br>(please identify below):  |
| <input type="checkbox"/> Change Status to LARGE ENTITY                             | <input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence<br>Address | Declaration Under 37 C.F.R.<br>1.131 (6 pages total):<br>One Declaration each for the<br>following: Steven M.<br>Trimberger; Walter N. Sze;<br>Raymond C. Pang. |
| <input type="checkbox"/> Express Abandonment Request                               | <input type="checkbox"/> Terminal Disclaimer  | Exhibit (3 pages)   |
| <input type="checkbox"/> Information Disclosure Statement                          | <input type="checkbox"/> Request for Refund   |   |
| <input type="checkbox"/> Substitute PTO-1449(s)<br>IDS by Applicant (PTO/SB/08A)   | Remarks   |   |
| <input type="checkbox"/> Certified Copy of Priority<br>Document(s)                 |   |   |
| <input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application      |   |   |
| <input type="checkbox"/> Response to Missing<br>Parts under 37 CFR<br>1.52 or 1.53 |   |   |

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|                            |                            |  |
|----------------------------|----------------------------|--|
| Firm or<br>Customer Number | 24309<br>(Customer Number) | Reg. Number 51,959   |
| Attn: Justin Liu           |                            |  |
| Signature                  |                            |  |
| Date                       | August 23, 2004            | Charge any additional fees required/credit any overpayment<br>to our Deposit Account Number: 24-0040 |

## CERTIFICATE OF MAILING

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| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date: August 23, 2004 |                |      |                 |
| Typed or Printed Name  | Julie Matthews |      |                 |
| Signature  |                | Date | August 23, 2004 |

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.



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|   |      |                          |                      |            |
|---|------|--------------------------|----------------------|------------|
| <b>FEE TRANSMITTAL<br/>for FY 2003</b><br><br><i>Patent fees are subject to annual revision</i> |      | <b>Complete if Known</b> |                      |            |
|   |      | Application / Conf. No.  | 09/924,974 / 7823    |            |
|   |      | Filing Date              | November 28, 2000    |            |
|   |      | First Named Inventor     | Steven M. Trimberger |            |
|   |      | Examiner Name            | Minh Dieu T. Nguyen  |            |
|   |      | Art Unit                 | 2137                 |            |
| TOTAL AMOUNT OF PAYMENT   | (\$) | 86.00                    | Attorney Docket No.  | X-805-3 US |

|   |          |   |     |                |  |
|---|----------|---|-----|----------------|--|
| <b>METHOD OF PAYMENT</b> (check one)  |          | <b>FEE CALCULATION</b> (continued)                        |     |                |  |
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees, any additional fees required, and credit any over payments to: |          | <b>3. ADDITIONAL FEES</b>                                 |     |                |  |
| <input checked="" type="checkbox"/> Deposit Account   |          |   |     |                |  |
| Deposit Account Number: 24-0040   |          |   |     |                |  |
| Deposit Account Name: XILINX, INC.  |          |   |     |                |  |
| <b>FEE CALCULATION</b>  |          |   |     |                |  |
| <b>1. BASIC FILING FEE</b>  |          |   |     |                |  |
| Large Entity  |          |   |     |                |  |
| Fee Code  | Fee (\$) | Fee Description   | Fee | Fee Paid       |  |
| 1001  | 770      | Utility filing fee  |     |                |  |
| 1002  | 330      | Design filing fee   |     |                |  |
| 1003  | 510      | Plant filing fee  |     |                |  |
| 1004  | 770      | Reissue filing fee  |     |                |  |
| 105   | 160      | Provisional filing fee                                    |     |                |  |
| SUBTOTAL (1)  |          | (\$)  |     |                |  |
| <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b>  |          |   |     |                |  |
| Total Claims: 12  |          | Extra Fee from below: 0                                   |     | Fee Paid: \$0  |  |
| Indep. Claims: 04   |          | Fee from below: 86  |     | Fee Paid: \$86 |  |
| Multiple Dependent Claims:  |          |   |     |                |  |
| **or number previously paid, if greater; For Reissues, see below  |          |   |     |                |  |
| Large Entity  |          |   |     |                |  |
| Fee Code  | Fee (\$) | Fee Description   | Fee | Fee Paid       |  |
| 1202  | 18       | Claims in excess of 20                                    |     |                |  |
| 1201  | 86       | Independent claims in excess of 3                         |     |                |  |
| 1203  | 290      | Multiple dependent claim, if not paid                     |     |                |  |
| 1204  | 86       | **Reissue independent claims over original patent         |     |                |  |
| 1205  | 18       | **Reissue claims in excess of 20 and over original patent |     |                |  |
| SUBTOTAL (2)  |          | (\$)  |     | 86.00          |  |
|   |          | *Reduced by Basic Filing Fee Paid                         |     |                |  |
|   |          | SUBTOTAL (3)  |     | (\$)           |  |

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|---------------------|------------|-----------------------------------|--------------|
| <b>SUBMITTED BY</b> |            | <b>Complete (if applicable)</b>   |              |
| Name (Print/Type)   | Justin Liu | Registration No. (Attorney/Agent) | 51,959       |
| Signature           |            | Telephone                         | 408-879-4641 |
|                     |            | Date                              | 08-23-2004   |

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